

# Bankstown Community Church

## Sunday School Consent Form

To be completed for all children under 18 years by the parent/guardian/carer

Effective from July 2020 to December 2020 in relation to all Sunday School lessons, activities and events held at 381 Hume Highway, Bankstown NSW (**Church Premises**) and conducted by Bankstown Community Church (**BCC**).

### Child – Personal Details

Name of child:	<input type="text"/>	Date of Birth:	<input type="text"/>
Medicare Number:	<input type="text"/>	Expiry Date:	<input type="text"/>
Private Insurer:	<input type="text"/>	Membership No:	<input type="text"/>

### Medical and Care needs

Does your child have any medical conditions that we should know about? No

Prescription medication  Chronic illness  Medical allergies  Other

Do you give permission for your child to take paracetamol if required? Yes  No

Does your child have any care needs that we should know about? No

Behavioural concerns  Psychiatric care  Other

Is there anyone who is legally restricted from seeing your child? Yes  No

If yes, please indicate who this is:

### Dietary Issues

Does your child have any special dietary need that we should know about? Yes  No

If yes, please provide further information:

Details of any known allergies:

*We will keep these details on file so that we do not have to ask for them prior to each event, unless you request otherwise. Please advise BCC as soon as practical of any changes to this information.*

### Parent / Caregiver 1

Name:  Contact Number:

Email:  Home Address:

*If there are any changes to the details on this form, please inform a BCC Sunday School Teacher immediately. This form will be completed annually and will be retained in our records in accordance with our WHS Policy. The Eldership team of BCC will treat the information contained confidentially. This information may be shared with a third party when it concerns medical health or care of the individual listed. If you wish to access this information or have any queries in relation to the manner in which we handle your personal information, please do not hesitate to contact us.*

**Parent / Caregiver 2 (only include detail that differs from above)**

Name:  Contact Number:

Email:  Home Address:

**Emergency Contact (alternative to parent/caregiver)**

Name:  Contact Number:

Relationship to child/ren:

Details of any other information you feel would be helpful for BCC to know about your child:

**Authorisation**

I give permission for my child to attend the BCC Sunday School lessons and all of its related activities and events held at the Church Premises. By allowing my child to attend, I give permission for my child's details to be stored by BCC (this may be on computer) for Sunday School purposes as considered necessary.

Please tick if you agree:

- I give permission for photographs and video of my child to be taken at any BCC Sunday School lessons and events (either virtual or physical) and displayed publicly (online and in print) unless I advise BCC Sunday School otherwise.
- I give permission for my child to participate in the online Sunday School lessons conducted via a Church owned account with Zoom, and a trained adult leader will be present at all times. The online Sunday School lessons will be held during but not limited to the COVID-19 period where normal physical meetings cannot be held. The online Sunday School lessons will continue to run concurrently when BCC reopens in August 2020.

Should there be any change to the details given on this form I understand that it is my responsibility to inform any of the BCC Sunday School teachers. In the case of a medical emergency, I give my permission for any necessary emergency first aid or medical treatment to be given, for the doctor chosen (either by the church authorities or other persons supervising or administering the activities), to secure proper treatment for and/or order hospitalisation, injection, anaesthetic or surgery for my child as named. In an emergency and if I am not contactable, I am willing for my child to receive hospital treatment. I understand that every reasonable effort will be made to contact me as soon as possible.

I understand that while every reasonable pre-caution will be undertaken to ensure the protection of my child, I hereby indemnify and release BCC, the authorised staff, leaders, volunteers and agents, from any and all liability in the event of any injury, accident, death, misfortune, damage or loss whatsoever that may occur me or any member of my family from a failure of duty of care and/or their property while present at or arising from claims in relation to my child's attendance at BCC Sunday School.

Full name of parent/guardian/carer:

Signature of parent/guardian/carer:

Date:

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